

## New Student Summer Camp Registration Form

**Child's name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Age:** \_\_\_\_\_

Parent/ Guardian's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Addresses: \_\_\_\_\_

Parent/ Guardian's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Child's Address: \_\_\_\_\_

Emergency Name: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Please submit or update the following information for your child:

- Current 121 form
- Copy of birth certificate

Please read and sign in the space provided. By signing you are stating that you have read and agree to the terms indicated.

1. I, the parent and or guardian of the above child, hereby give my approval for their participation in any and all youth activities related to the program. I assume all risks and hazards incidental to such participation. I hereby waive, absolve, indemnify, and agree to hold harmless Beth Israel staff, organizers, participants and persons working with my child for any claims arising out of an injury to my child.

\_\_\_\_\_  
Signature Date: \_\_\_\_\_

2. In case of sickness or injury during camp, I give permission for my child to be taken to the nearest medical facility for treatment.

\_\_\_\_\_  
Signature Date: \_\_\_\_\_

3. I give Beth Israel Preschool to apply sunscreen and or bug repellent *that I provide*. I understand that Beth Israel Preschool does not provide supply sunscreen and bug repellent.

\_\_\_\_\_  
Signature Date: \_\_\_\_\_

4. I give Beth Israel Preschool my permission to photograph and publish photos of my child for the community to view in advertising in the newspaper, website, fliers and other internal marketing and events. I understand that these photos will not be sold or distributed.

\_\_\_\_\_  
Signature Date: \_\_\_\_\_

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